

CALIFORNIA HEALTH AND HUMAN SERVICES AGENCY

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**SANDRA SHEWRY** 

Director

November 4, 2004

To All Members of the Legislature:

We are writing to share with you action we are taking today with regard to implementation of California's nurse-to-patient staffing ratios.

California's first-in-the-nation staffing ratios were enacted in 1999 and implemented on January 1, 2004. These ratios set minimum standards for nurse staffing in each unit of a hospital. The Administration is committed to the fundamental principle reflected in the ratios – establishing standards for safe patient care.

Early experience has shown that California's adoption of minimum nurse staffing levels is a significant change in care and practice patterns. Nurses, other health professionals, and hospital administrators have all seen changes in patient care and hospital operations since the implementation of the ratios. Indeed, any discussion of the significant factors impacting patient care and hospital operations includes a discussion of the ratio requirements.

While many of the reports of impacts of the regulations have been positive, some have raised concern with regard to unintended consequences of the ratios.

- Eleven hospitals cited nurse-to-patient staffing ratios as a cause for closure of the hospital, emergency department or psychiatric units.
- Between 2003-2004, six emergency departments have closed in the greater Los Angeles area.
- Four hospitals have petitioned the Department of Health Services to suspend the use of beds because of inability to comply with the ratios.

The importance of hospital and emergency services to California's health care delivery system compels us to assure that we better understand the full impact of the ratios on the complex interactions of all aspects of the health care delivery system.

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Today, the Administration is filing emergency regulations to do the following:

- Maintain until January 2008, the current limit of no more than six patients assigned to any one nurse for medical/surgical and mixed units. Previously, the maximum number of patients per nurse in those units was scheduled to drop to five in January 2005. Now, that change will occur in 2008.
- Provide hospital emergency departments with temporary staffing flexibility to respond to an unforeseeable influx of patients with immediate needs. Hospitals will continue to be required to return to the specified staffing ratio as soon as possible. In addition, the documentation requirements for emergency departments will be simplified.
- Clarify the requirement that the regulations be met "at all times" to include whenever the nurse is on the unit and available for patient care. Currently, a strict interpretation of the regulations requires that all patient assignments be given to another nurse during restroom breaks or phone calls.

The Department of Health Services is engaged in the design phase of an accelerated study to determine the patient, workforce, and institutional effects of the current ratios. This study will allow the Administration and the Legislature to better understand the impact of the current ratios before further changes occur.

Our first priority remains unchanged – patient safety. The Administration looks forward to working with the Legislature in the ongoing effort to provide safe, accessible and affordable healthcare for all Californians.

Sincerely,

S. Kimberly Belshe

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